



Senate

General Assembly

File No. 370

January Session, 2011

Substitute Senate Bill No. 1050

Senate, April 5, 2011

The Committee on Public Health reported through SEN. GERRATANA of the 6th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT CONCERNING THE AVAILABILITY OF AUTOMATIC EXTERNAL DEFIBRILLATORS IN CERTAIN HEALTH CARE SETTINGS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective October 1, 2011*) (a) Each (1) outpatient
2 surgical facility, as defined in section 19a-493b of the general statutes;
3 (2) outpatient dialysis unit, which is not located within or on the
4 grounds of a hospital; (3) chronic and convalescent nursing home; (4)
5 rest home with nursing supervision; and (5) managed residential
6 community which offers assisted living services to community
7 residents in accordance with the provisions of chapter 368bb of the
8 general statutes, shall provide and maintain in a central location on the
9 premises of such facility, not less than one automatic external
10 defibrillator, as defined in section 19a-175 of the general statutes.

11 (b) The Commissioner of Public Health may adopt regulations in
12 accordance with the provisions of chapter 54 of the general statutes as
13 may be necessary to carry out the provisions of this subsection.

14 Sec. 2. Section 10-212d of the general statutes is repealed and the
15 following is substituted in lieu thereof (*Effective from passage*):

16 (a) On and after July 1, 2010, subject to the provisions of subsection
17 (d) of this section, each local and regional board of education shall
18 have at each school under the board's jurisdiction: (1) An automatic
19 external defibrillator; and (2) school personnel trained in the operation
20 of such automatic external defibrillator and the use of
21 cardiopulmonary resuscitation. The automatic external defibrillator
22 and school personnel trained in the operation of an automatic external
23 defibrillator and the use of cardiopulmonary resuscitation shall be
24 accessible during the school's normal operational hours [.] and during
25 school-sponsored athletic practices and athletic events taking place on
26 school grounds. [and during school sponsored events not occurring
27 during the normal operational hours of the school.]

28 (b) Not later than July 1, 2010, each school shall develop an
29 emergency action response plan that addresses the appropriate use of
30 school personnel to respond to incidents involving an individual
31 experiencing sudden cardiac arrest or a similar life-threatening
32 emergency while on school grounds.

33 (c) Not later than July 1, 2010, each school with an athletic
34 department or organized athletic program shall develop an emergency
35 action response plan that addresses the appropriate use of school
36 personnel to respond to incidents involving an individual experiencing
37 sudden cardiac arrest or a similar life-threatening emergency while
38 attending or participating in an athletic practice or event while on
39 school grounds.

40 (d) A local or regional board of education shall not be required to
41 comply with the provisions of subsection (a) of this section if federal,
42 state or private funding is not available to such local and regional
43 board of education to purchase an automatic external defibrillator and
44 pay for the training of school personnel described in said subsection
45 (a). A local and regional board of education may accept a donation of
46 an automatic external defibrillator that meets the standards established

47 by the United States Food and Drug Administration and is in
48 compliance with the device manufacturer's maintenance schedule. A
49 local and regional board of education may accept gifts, grants and
50 donations, including in-kind donations designated for the purchase of
51 an automatic external defibrillator and for the costs incurred to inspect
52 and maintain such device and train staff in the use of such device.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2011</i>	New section
Sec. 2	<i>from passage</i>	10-212d

PH *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note**State Impact:**

Agency Affected	Fund-Effect	FY 12 \$	FY 13 \$
Social Services, Dept.	GF - Potential Cost	Minimal	Minimal

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill could result in a cost to the Department of Social Services associated with requiring certain health care facilities to provide and maintain at least one automatic external defibrillator (AED). To the extent that 1) nursing homes have to purchase additional AEDs, and 2) such cost would impact the rebasing of Medicaid rates, the state could incur a cost. AEDs are estimated to cost between \$1,000 and 2,000 each.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

OLR Bill Analysis**sSB 1050*****AN ACT CONCERNING THE AVAILABILITY OF AUTOMATIC EXTERNAL DEFIBRILLATORS IN CERTAIN HEALTH CARE SETTINGS.*****SUMMARY:**

This bill requires (1) outpatient surgical facilities, (2) outpatient dialysis units not located within or on the grounds of a hospital, (3) nursing homes, and (4) managed residential communities offering assisted living services, to provide and maintain at least one centrally-located automatic external defibrillator (AED) on its premises. It allows the Department of Public Health (DPH) commissioner to adopt regulations to implement this requirement.

The bill also eliminates the statutory requirement that a local and regional board of education have, at each school under its jurisdiction, (1) an AED and (2) school personnel trained in AED operation and CPR during school-sponsored events not taking place during normal school hours. It continues to require the AED and trained personnel to be available during the school's normal hours and school-sponsored athletic events on school grounds. By law, a board of education does not have to comply with this requirement if state, federal, or private funding is not available to it for AED purchase and school personnel training.

EFFECTIVE DATE: October 1, 2011, except the provision regarding the availability of AEDs in schools takes effect upon passage.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 28 Nay 0 (03/21/2011)